

# LOBBYIST ACTIVITY REPORT

<sup>2</sup> D.C. Official Code §1-1162.30(a).

## 2. Lobbyist (s) working for Registrant

(1) (a) Name Tina Ang

(b) Daytime Telephone Number (202) 585-6500 Cellular Telephone Number \_\_\_\_\_

(c) Address 700 12th Street NW, Suite 1100 Washington District of Columbia 20005  
(Street Address) (City, State, Zip Code)

(2) (a) Name John Ray

(b) Daytime Telephone Number (202) 585-6500 Cellular Telephone Number \_\_\_\_\_

(c) Address 700 12th Street NW, Suite 1100 Washington District of Columbia 20005  
(Street Address) (City, State, Zip Code)

## 3. Clients of Registrant (when Registrant is a Lobbyist and/or Lobbying Entity)

**Note: Registrants must file a separate Lobbyist Registration Form and Lobbyist Activity Report for each client)**

(1) (a) Name \_\_\_\_\_

(b) Daytime Telephone Number \_\_\_\_\_ Cellular Telephone Number \_\_\_\_\_

(c) Address \_\_\_\_\_  
(Street Address) (City, State, Zip Code)

(d) Nature of Business \_\_\_\_\_

## 4. Terms of Compensation:

(a) Type (Hourly, Annual fee, Salar

Retainer

(b) Duration of Engagement

Annual

5. Identify matter(s) by subject and formal designation on which the Lobbyist and/or Lobbying Entity expects to lobby on behalf of the client identified in (3) above. Attach a Supplemental Sheet if additional space is needed.

**Matters affecting the energy industry**

6. Identify (by name and nature of business relationship with the Registrant) each official in the executive or legislative branch and any member of the official's staff, including personal and committee staff, who has a business relationship or a professional services relationship with the Registrant.

(1) (a) Name and Title of Official/Member of Official's Staff

(b) Nature of Relationship with Registrant

7. Identify each official in the executive or legislative branch with whom the Registrant has had written or oral communications during the reporting periods related to lobbying activities conducted by the Registrant.

(1) (a) Name and Title of Official

**Jack Evans, Council Member**

(b) Date of Communication(s) 03/20/2015

(c) Type of Communication(s) (i.e. telephone conversation, meeting, email, etc.)

**Telephone**

(d) Nature and Purpose of Communication(s)

**Business**

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**GOVERNMENT OF THE DISTRICT OF COLUMBIA  
BOARD OF ETHICS AND GOVERNMENT ACCOUNTABILITY  
441 4th Street, N.W., Suite 830S  
Washington, D.C. 20001**

**SCHEDULE A - LOBBYIST ACTIVITY REPORT**

**COMPENSATION PAID BY REGISTRANT (i.e. LOBBYING ENTITY, CLIENT) TO THE  
LOBBYIST/LOBBYIST ENTITY FOR LOBBYING**

Year: 2015

Period of Report: July Report Period Covering: 01/01/2015 through 06/30/2015

**Compensation includes all consultant fees, salary, wages, etc. Note: The registrant must maintain detailed records of receipts and expenditures<sup>1</sup>. (Amounts may be rounded off to whole dollars). Attach a Supplemental Sheet if additional space is needed.<sup>2</sup>**

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(1) (a) Name of Lobbyist/Lobbyist Entity John Ray

(b) Daytime Telephone Number (202) 585-6500 Cellular Telephone \_\_\_\_\_

(c) Address 700 12th Street NW, Suite 1100 Washington District of Columbia 20005  
(Street Address) (City, State, Zip Code )

(d) Temporary Address (while lobbying) \_\_\_\_\_  
(Street Address) (City, State, Zip Code )

**(e) Compensation Paid:**

(i) Compensation	<u>\$156.00</u>	<u>\$156.00</u>
	(Total paid this period)	(Cumulative annual total paid)

(ii) Retainer	<u>\$0.00</u>	<u>\$0.00</u>
	(Total paid this period)	(Cumulative annual total paid)

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<sup>1</sup> D.C. Official Code § 1-1162.30(b).

<sup>2</sup> Each person to whom the Registrant has paid compensation/fees to lobby on his or her behalf shall be listed in the report. (D.C. Official Code § 1-1162.30(6)).

(2) (a) Name of Lobbyist/Lobbyist Entity Tina Ang

(b) Daytime Telephone Number (202) 585-6500 Cellular Telephone \_\_\_\_\_

(c) Address 700 12th Street NW, Suite 1100 Washington District of Columbia 20005  
(Street Address) (City, State, Zip Code )

(d) Temporary Address (while lobbying) \_\_\_\_\_  
(Street Address) (City, State, Zip Code )

**(e) Compensation Paid:**

(i) Compensation	<u>\$0.00</u>	<u>\$0.00</u>
	(Total paid this period)	(Cumulative annual total paid)

(ii) Retainer	<u>\$0.00</u>	<u>\$0.00</u>
	(Total paid this period)	(Cumulative annual total paid)

**Total Paid to all Lobbyists/Lobbying entities:**

(i) Compensation	<u>\$156.00</u>	<u>\$156.00</u>
	(Total paid this period)	(Cumulative annual total paid)

(ii) Retainer	<u>\$0.00</u>	<u>\$0.00</u>
	(Total paid this period)	(Cumulative annual total paid)

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**CARRY TOTAL FORWARD TO LINE 1 OF SCHEDULE B**

**GOVERNMENT OF THE DISTRICT OF COLUMBIA  
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**SCHEDULE A-1 - LOBBYIST ACTIVITY REPORT  
LOBBYIST EXPENDITURES**

Year: 2015

Period of Report: July Report Period Covering: 01/01/2015 through 06/30/2015

**Note: The registrant must maintain detailed records of receipts and expenditures<sup>1</sup>. (Amounts may be rounded off to whole dollars).**

(1) (a) Registrant Name Exelon Corporation

(b) Daytime Telephone Number 610-765-6920 Cellular Telephone 215-519-5631

(c) Address 2301 Market Street, S23-1 Philadelphia Pennsylvania 19101  
(Street Address) (City, State, Zip Code)

(d) Temporary Address  
(while lobbying) (Street Address) (City, State, Zip Code)

**(2) Expenditures:**

(a) Office Expenses:	<u>\$555.83</u> (Total paid this period)	<u>\$555.83</u> (Cumulative annual total paid)
(b) Advertising & Publications:	<u>\$0.00</u> (Total paid this period)	<u>\$0.00</u> (Cumulative annual total paid)
(c) Personal Sustenance:	<u>\$0.00</u> (Total paid this period)	<u>\$0.00</u> (Cumulative annual total paid)
(d) Lodging:	<u>\$0.00</u> (Total paid this period)	<u>\$0.00</u> (Cumulative annual total paid)
(e) Travel:	<u>\$27.00</u> (Total paid this period)	<u>\$27.00</u> (Cumulative annual total paid)
(f) Other Expenses:	<u>\$250.00</u> (Total paid this period)	<u>\$250.00</u> (Cumulative annual total paid)
<b>Total:</b>	<u>\$832.83</u> (Total paid this period)	<u>\$832.83</u> (Cumulative annual total paid)

**CARRY TOTAL FORWARD TO LINE 2 OF SCHEDULE B.**

<sup>1</sup> Each registrant shall obtain and preserve all accounts, bills, receipts, books, papers, and documents necessary to substantiate the activity reports required to be made pursuant to this section for 5 years from the date of filing of the report containing these items. These materials shall be made available for inspection upon request by the Director after reasonable notice. (D.C. Official Code § 1-1162.30(b)).

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**LOBBYIST ACTIVITY REPORT  
SCHEDULE A-2 -OTHER EXPENDITURES**

Year: \_\_\_\_\_

Period of Report: \_\_\_\_\_ Period Covering: \_\_\_\_\_ through \_\_\_\_\_

**Each political expenditure, loan, gift, honorarium, or contribution of \$50 or more made by the Registrant or anyone acting on behalf of the Registrant to benefit an official in the legislative or executive branch, a member of his or her staff or household, or a campaign or testimonial committee established for the benefit of the official, shall be itemized by date, beneficiary, amount, and circumstances of the transaction, including the aggregate of all expenditures that are less than \$50 <sup>1</sup>. Attach a supplemental sheet if additional space is needed.**

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(1) Registrant Name: \_\_\_\_\_

Name of Beneficiary: \_\_\_\_\_

Amount: \_\_\_\_\_

Type of Transaction (i.e. political expenditure, loan, gift, honorarium, contribution):

Circumstances/Purpose of the Transaction:

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**NOTE: CARRY TOTAL FORWARD TO LINE 3 ON SCHEDULE B.**

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<sup>1</sup> D.C. Official Code § 1-1162.30(3).

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**SCHEDULE B - CERTIFICATION**

Year: 2015

**Please enter the total amounts paid for the reporting period for each of the categories indicated.  
The amounts should be taken from the Schedule indicated.**

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(1) Total compensation paid to the Lobbyist/Lobbying Entity:	<b>\$156.00</b>
	<hr/> (Schedule A)
(2) Total of expenditures made for purposes of lobbying:	<b>\$833.00</b>
	<hr/> (Schedule A-1)
(3) Total of other expenditures related to lobbying activities:	<b>\$0.00</b>
	<hr/> (Schedule A-2)
(4) Total expenditures: (Add Lines 2 and 3):	<b>\$833.00</b>
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I, the undersigned, certify and declare under oath that all of my statements on this form is to the best of my knowledge and belief, true, correct, and complete. I understand that the making of a false statement on this form or materials submitted with this form is punishable by criminal penalties pursuant to D.C. Official Code § 22-2405 et seq. (2001).

**Certified By:**

Thomas Armstrong, Manager, Business Operations

**Name (Printed)**

**ELECTRONICALLY CERTIFIED**

**Signature of Registrant<sup>1</sup>**

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<sup>1</sup> If not an individual, an authorized officer or agent of the Registrant must sign.